## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000057960

Entity Name: THE SILVER LINING OF SOUTHWEST FLORIDA, INC.

FILED Sep 28, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace Of Dusiliess.

Current Mailing Address: New Mailing Address:

2759 MICHIGAN AVE FT MYERS, FL 33916

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STRICKLAND, FRANCES STRICKLAND, FRANCES H
2759 MICHIGAN AVE
FT MYERS, FL 33916 US STRICKLAND, FRANCES H
2759 MICHIGAN AVE
FT MYERS, FL 33916 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: FRANCES H. STRICKLAND 09/28/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 ( ) Delete
 Title:
 D
 (X) Change ( ) Addition

 Name:
 MILLER, DAPHNE
 Name:
 STRICKLAND, FRANCES H PRESIDE

 Address:
 2759 MICHIGAN AVE
 Address:
 2759 MICHIGAN AVENUE

 City-St-Zip:
 FT MYERS, FL 33916
 City-St-Zip:
 FT MYERS, FL 33916 US

Title: D (X) Delete Title: ( ) Change ( ) Addition
Name: STRICKLAND FRANCES Name:

 Name:
 STRICKLAND, FRANCES
 Name:

 Address:
 2759 MICHIGAN AVE
 Address:

 City-St-Zip:
 FT MYERS, FL 33916
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANCES H. STRICKLAND D 09/28/2005